Fill in this information	n to identify your case:	
Debtor 1	Teresa Johnson	_
Debtor 2 (Spouse, if filing)		_
United States Bankr	uptcy Court for the: EASTERN DISTRICT OF PENNSYLVANIA	_
	9-10072	Check if this is:
(If known)		An amended filing
		A supplement showing postpetition chapter 13 income as of the following date:
Official Forr	n 106l	MM / DD/ YYYY
Cabadula I	· Value Incomo	IVIIVI / DD/ 1111

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Describe Employment				
1.	Fill in your employment information.		Debto	or 1	Debtor 2 or non-filling spouse
	If you have more than one job,	F	■ Em	nployed	☐ Employed
	attach a separate page with information about additional	Employment status	□ No	t employed	☐ Not employed
	employers. Include part-time, seasonal, or	Occupation	unen gua	nployed - school crossing	
	self-employed work.	Employer's name		of philadelphia	
	Occupation may include student or homemaker, if it applies.	Employer's address			
			phila	delphia, PA	
		How long employed th	nere?	17 years	
Par	ft 2: Give Details About Mor	othly income			

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.
 Estimate and list monthly overtime pay.

20 Zomiato ana not monany ovoramo payi

Calculate gross Income. Add line 2 + line 3.

For Debtor 1 For Debtor 2 or non-filing spouse

2. \$ 0.00 \$ N/A

3. +\$ 0.00 +\$ N/A

4. \$ 0.00 \$ N/A

Official Form 106l Schedule I: Your Income page 1

Copy line 4 here	Debt	or 1	Teresa Johnson	_	C	Case number (if ki	nown)	19-10	072		
See Section of the comment of the co						For Debtor 1					
5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement fund loans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retarious plans plan		Cop	by line 4 here	4.		\$ (0.00		ming c		_
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8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Food Stamps 8f. \$ 130.00 \$ N/A 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 1,960.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combin monthly 13. Do you expect an increase or decrease within the year after you file this form?			Include alimony, spousal support, child support, maintenance, divorce	80) .	\$	0.00	\$		N/A	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Food Stamps 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 1,960.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 13. Do you expect an increase or decrease within the year after you file this form?		8d.	Unemployment compensation	8d	d.	\$ 1,200	0.00	\$		N/A	-
Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Food Stamps 8f. \$ 130.00 \$ N/A 8g. Pension or retirement income 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 1,960.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 14. \$		8e.	Social Security	8e	€.	\$ 630	0.00	\$		N/A	_
8g. Pension or retirement income 8h. Other monthly income. Specify: 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$\frac{1,960.00}{\\$} + \\$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combin monthly 13. Do you expect an increase or decrease within the year after you file this form?		8f.	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.			\$ 130	0.00	\$		N/A	
8h. Other monthly income. Specify: 8h. + \$ 0.00 + \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 1,960.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combin monthly 13. Do you expect an increase or decrease within the year after you file this form?		8g.		 8g] .			\$			_
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combin monthly 13. Do you expect an increase or decrease within the year after you file this form?		_	Other monthly income. Specify:			\$	0.00	+ \$		N/A	-
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combin monthly 13. Do you expect an increase or decrease within the year after you file this form?	9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,960	0.00	\$		N/A	A
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combin monthly 13. Do you expect an increase or decrease within the year after you file this form?	10.	Calo	culate monthly income. Add line 7 + line 9.	10.	\$	1 960 00	+ \$		N/Δ	= \$	1,960.00
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities</i> and Related <i>Data</i> , if it applies 13. Do you expect an increase or decrease within the year after you file this form?			•			1,000.00			14/7		1,000.00
Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combin monthly 13. Do you expect an increase or decrease within the year after you file this form?	11.	Inclu othe Do r	ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not	depe							0.00
13. Do you expect an increase or decrease within the year after you file this form?	12.	Writ	e that amount on the Summary of Schedules and Statistical Summary of Certain						12.	\$	1,960.00
											ned ly income
□ Yes Evolain:	13.	Do :	No.	?							

Official Form 106l Schedule I: Your Income page 2

Fill	in this informat	tion to identify yo	our case:						
Deb		Teresa John	son			Che		nded filing	
	tor 2 ouse, if filing)								wing postpetition chapter the following date:
Unit	ed States Bankr	uptcy Court for the	EASTE	RN DISTRICT OF PENNS	SYLVANIA		MM / D	D / YYYY	
	e number 19	-10072							
Of	fficial Fo	rm 106J							
		J: Your l							12/1
info	ormation. If me		eded, atta	If two married people a ch another sheet to this n.					
Par		ibe Your House	hold						
1.	Is this a join ■ No. Go to		n a senara	ate household?					
	□ No	0	·	al Form 106J-2, <i>Expense</i> s	s for Separate House	ehold of De	btor 2.		
2.	Do you have	e dependents?	■ No						
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debto		Dep age	endent's	Does dependent live with you?
	Do not state								□ No □ Yes
									□ No
									☐ Yes ☐ No
									☐ Yes
									□ No □ Yes
3.	expenses of	enses include f people other tl d your depende	han $_{\square}$	No Yes					
exp	imate your ex		our bankru	ptcy filing date unless					apter 13 case to report of the form and fill in the
the		n assistance and		government assistance luded it on <i>Schedule I:</i>				Your exp	enses
4.		r home owners		ses for your residence.	Include first mortgage	e 4.	\$		620.00
	If not includ	ed in line 4:							
	4a. Real e	state taxes				4a.	\$		0.00
		rty, homeowner's				4b. 4c.	·		0.00
		maintenance, re owner's associat		pkeep expenses Iominium dues		4d.	\$		100.00 0.00
5.	Additional n	nortgage payme	ents for yo	ur residence, such as ho	me equity loans	5.	\$		0.00

eb	or 1 Teresa Johnson	Case num	ber (if known)	19-10072
	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	300.00
	6b. Water, sewer, garbage collection	6b.	\$	50.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	37.00
	6d. Other. Specify:	6d.	\$	0.00
	Food and housekeeping supplies		\$	400.00
	Childcare and children's education costs	8.	\$	0.00
	Clothing, laundry, and dry cleaning	9.	\$	0.00
).	Personal care products and services	10.	\$	100.00
1.	Medical and dental expenses	11.	\$	0.00
2.	Transportation. Include gas, maintenance, bus or train fare.	4.0	•	00.00
_	Do not include car payments.	12.	·	80.00
	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	Charitable contributions and religious donations	14.	\$	0.00
5.	Insurance.			
	Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance	15a.	¢	0.00
	15b. Health insurance	15a. 15b.		0.00
	15c. Vehicle insurance	15b.	·	0.00
		15d.	·	0.00
	15d. Other insurance. Specify:	13u.	Φ	0.00
ο.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
7	Installment or lease payments:		Ψ	0.00
	17a. Car payments for Vehicle 1	17a.	\$	0.00
	17b. Car payments for Vehicle 2	17b.	*	0.00
	17a Other Charlett	17c.		0.00
	17d. Other. Specify:	17d.	·	0.00
3.	Your payments of alimony, maintenance, and support that you did not report as			
•	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
9.	Other payments you make to support others who do not live with you.		\$	0.00
	Specify:	19.		
).	Other real property expenses not included in lines 4 or 5 of this form or on Sched	dule I: Yo	our Income.	
	20a. Mortgages on other property	20a.	·	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00
1.	Other: Specify:	21.	+\$	0.00
,	Calculate your monthly expenses			
۷.	22a. Add lines 4 through 21.		\$	1,687.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		·	1,007.00
			,	4 007 00
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	1,687.00
	Calculate your monthly net income.			
3.	- · · · · · · · · · · · · · · · · · · ·	23a.	\$	1,960.00
3.	23a. Copy line 12 (your combined monthly income) from Schedule I.			
3.	23a. Copy line 12 (your combined monthly income) from Schedule I.23b. Copy your monthly expenses from line 22c above.	23b.	-\$	1,687.00
3.	, ,		-\$	1,687.00
3.	, ,		·	1,687.00

□ No.

■ Yes. Explain here: once job reinstated, income and expenses will change